4-10-07

# TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

| | |
|---|---|
| Application Number | 10/789,627-Conf. #7662 |
| Filing Date | February 26, 2004 |
| First Named Inventor | Howard KAUFMAN |
| Art Unit | 1632 |
| Examiner Name | V. E. Bertoglio |
| Attorney Docket Number | 0019240.00461US2 |

Total Number of Pages in This Submission: 1

## ENCLOSURES (Check all that apply)

- [x] Fee Transmittal Form
  - [ ] Fee Attached
- [x] Amendment/Reply
  - [ ] After Final
  - [ ] Affidavits/declaration(s)
- [x] Extension of Time Request
- [ ] Express Abandonment Request
- [ ] Information Disclosure Statement
- [ ] Certified Copy of Priority Document(s)
- [ ] Reply to Missing Parts/ Incomplete Application.
  - [ ] Reply to Missing Parts under 37 CFR 1.52 or 1.53

- [ ] Drawing(s)
- [ ] Licensing-related Papers
- [ ] Petition
- [ ] Petition to Convert to a Provisional Application
- [ ] Power of Attorney, Revocation Change of Correspondence Address
- [ ] Terminal Disclaimer
- [ ] Request for Refund
- [ ] CD, Number of CD(s) _____
  - [ ] Landscape Table on CD

- [ ] After Allowance Communication to TC
- [ ] Appeal Communication to Board of Appeals and Interferences
- [ ] Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
- [ ] Proprietary Information
- [ ] Status Letter
- [x] Other Enclosure(s) (please Identify below):

Certificate of Express Mailing
Return Receipt Postcard

**Remarks**

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|---|---|
| Firm Name | WILMER CUTLER PICKERING HALE AND DORR LLP |
| Signature | *Jane M Love* |
| Printed name | Jane M. Love, Ph.D. |
| Date | 4/9/07 |
| Reg. No. | 42,812 |

Express Mail Label No. EV 901253748 US          Dated: April 9, 2007
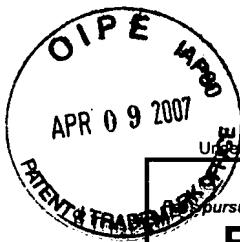
**OIPE**
**APR 0 9 2007**

*Effective on 12/08/2004.*
*pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).*

# FEE TRANSMITTAL
## For FY 2007

[X] Applicant claims small entity status. See 37 CFR 1.27

| | | |
|---|---|---|
| **TOTAL AMOUNT OF PAYMENT** | ($) | 1,080.00 |

### Complete if Known

| | |
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| First Named Inventor | Howard KAUFMAN |
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## METHOD OF PAYMENT (check all that apply)

[ ] Check  [ ] Credit Card  [ ] Money Order  [ ] None  [ ] Other (please identify): _____

[X] Deposit Account   Deposit Account Number: 08-0219   Deposit Account Name: Wilmer Cutler Pickering Hale and Dorr LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

[X] Charge fee(s) indicated below          [ ] Charge fee(s) indicated below, **except for the filing fee**

[X] Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17          [X] Credit any overpayments

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES Fee ($) | Small Entity Fee ($) | SEARCH FEES Fee ($) | Small Entity Fee ($) | EXAMINATION FEES Fee ($) | Small Entity Fee ($) | Fees Paid ($) |
|---|---|---|---|---|---|---|---|
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | _____ |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | _____ |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | _____ |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | _____ |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | _____ |

### 2. EXCESS CLAIM FEES

| Fee Description | Fee ($) | Small Entity Fee ($) |
|---|---|---|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| Total Claims | Extra Claims | Fee ($) | Fee Paid ($) | | Multiple Dependent Claims | |
|---|---|---|---|---|---|---|
| | | | | | Fee ($) | Fee Paid ($) |
| ____ - ____ = | ____ | x ____ = | ____ | | ____ | ____ |

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | Extra Claims | Fee ($) | Fee Paid ($) |
|---|---|---|---|
| ____ - ____ = | ____ | x ____ = | ____ |

HP = highest number of independent claims paid for, if greater than 3.

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee ($) | Fee Paid ($) |
|---|---|---|---|---|
| ____ - 100 = | ____ | /50 ____ (round up to a whole number) x | ____ | = ____ |

### 4. OTHER FEE(S)

| | Fees Paid ($) |
|---|---|
| Non-English Specification, $130 fee (no small entity discount) | |
| Other (e.g., late filing surcharge): 2255 Extension for response within fifth month | 1,080.00 |

## SUBMITTED BY

| Signature | [signature] | Registration No. (Attorney/Agent) | 42,812 | Telephone | (212) 230-8800 |
|---|---|---|---|---|---|
| Name (Print/Type) | Jane M. Love, Ph.D. | | | Date | 4/9/07 |

| Express Mail Label No. EV 901253748 US | Dated: April 9, 2007 |
|---|---|

US1DOCS 6144242v1